

MIR ENCLOSURE FORM 12
Night Vision Device Data

THIS IS PART OF A LIMITED USE NAVAL AIRCRAFT MISHAP INVESTIGATION REPORT.
LIMITED DISTRIBUTION AND SPECIAL HANDLING REQUIRED IN ACCORDANCE WITH OPNAVINST 3750.6.

I. AIRCRAFT DATA: (If more than one aircraft is involved in the mishap, complete for each aircraft)

A. WINDSCREEN CONDITION: Good ☐ Med ☐ Poor ☐

B. WINDOWS: Closed ☐ Open ☐

C. HATCHES:

Cockpit Closed ☐ Open ☐ Removed ☐

Cargo Closed ☐ Open ☐ Removed ☐

II. FLIGHT DATA:

A. CLIMATOLOGY/TERRAIN:

1. Moon: Rise _____ Set _____ No Moon _____
Percent Illumination _____ % Angle Above Horizon _____
Azimuth _____ From North _____

2. Subjective Evaluation of Very Bright ☐ Bright ☐ Moderate ☐ Dim ☐
Artificial Ambient Light Dark ☐ Very Dark ☐

3. Subjective Evaluation of Available Contrast/Visual Poor Contrast ☐ Fair Contrast ☐ Good Contrast ☐
Cues At Time of Mishap: Poor Cues ☐ Fair Cues ☐ Good Cues ☐

4. Type of Terrain in Mishap Mountains ☐ Rolling Slopes ☐ Farmland ☐
Area: (Check as many as applicable) Water ☐ Snow Covered ☐ Flat ☐ Desert ☐
Forest ☐ Swamp ☐ Paved Surface ☐

5. Environmental Background Lights: Metropolitan ☐ Small Town ☐ Farm/Ranch ☐ Unpopulated ☐
Area Area Land

B. MODE OF FLIGHT: Single A/C ☐ NAV ☐ LATT/TERF ☐ Weapons Delivery ☐
Formation ☐ Enroute Transit ☐ Take-off ☐ Landing ☐
Mishap A/C # _____ of _____ (No.) A/C
Position of Mishap A/C in Flight _____

C. EXTERNAL LIGHTING
OF AIRCRAFT:

Anti-Collision: Bright ☐ Dim ☐ Off ☐ IR ☐

Position Light: Bright ☐ Dim ☐ Off ☐ IR ☐

Formation: Bright ☐ Dim ☐ Off ☐ IR ☐

Drogue Light: Bright ☐ Dim ☐ Off ☐ IR ☐

(Tankers)

Other NVD Light: On ☐ Off ☐ Not Installed ☐ IR ☐

Specify: _____

Blade Tip: On ☐ Off ☐ Not Installed ☐ IR ☐

Controllable Spot: On ☐ Off ☐ Pink Filter Used ☐ IR ☐

Hover/Landing: On ☐ Off ☐ Red Lens Used ☐ IR ☐

D. INTERNAL LIGHTING OF AIRCRAFT: Inst panel: bright ☐ dim ☐ NVD compatible lights in use? _____
Cockpit flood: on ☐ off ☐ NVD compatible lights in use? _____
Supplemental lighting: NVD compatible? _____
flashlight ☐ finger lights ☐ wrist ☐
grimes ☐ cabin ☐

E. DEGRADATIONS: Did cockpit/cabin lighting configuration degrade NVD? Yes ☐ No ☐
If yes, describe in remarks section.

Date of mishap _____

Reporting custodian _____

BUNO _____

Mishap severity _____

Mishap category _____

Aircraft model _____

INSTRUCTIONS FOR COMPLETION OF MIR ENCLOSURE FORM 12

Night Vision Device Data

Submission Criteria: Submit this form, Sections I and II, for each aircraft when NVDs were involved in the mishap.

DO NOT WRITE HERE

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COMPLETE THIS PAGE FOR EACH PERSON USING NVDS.

III. NVD DATA: Pilot ☐ Copilot ☐ Crewchief ☐ Other Crew ☐ _____ Other ☐ _____

A. TYPE NVD: AN/PVS-5A ☐ AN/AVS-6 ☐
AN/PVS-5B ☐ NAVFLIR ☐
AN/PVS-5C ☐ Cat's Eye ☐ Other ☐ _____

B. NVD HELMET ATTACHMENT: Straps and Tubing ☐ GM-6 Modified Face Plate ☐
ANVIS Visor ☐ V (1) ☐
V (2) ☐

C. HELMET MODS: Describe in detail with photographs. Attach to copy of this form
NONE ☐

D. COUNTERWEIGHT: Lead ☐ Loose Wt ☐ Other ☐

E. COUNTERWEIGHT IN OUNCES: _____ Oz

F. DID COUNTERWEIGHT BREAK AWAY DURING MISHAP: Yes ☐ No ☐

G. DAYLIGHT FILTERS: Yes ☐ No ☐

H. CORRECTIVE SPECTACLES OR LASER PROTECTION: Yes ☐ No ☐

I. LENS MATERIAL TYPE: Glass ☐ Plastic GR 39 ☐ Polycarbonate ☐ Other ☐

J. TYPE BATTERY: Alkaline ☐ Mercury ☐ Lithium ☐

K. TOTAL TIME ON BATTERY: _____ Mins.

L. TIME OF BATTERY IN USE FOR MISHAP: _____ Mins.

M. TYPE OF BATTERY PACK: Single ☐ Double ☐ Triple ☐ Arctic Adaptor ☐

IV. NVD TRAINING: Pilot _____ Copilot _____ Crew Chief _____ Other _____

A. INITIAL QUALIFICATION DATE/LOCATION: _____

B. NVD HOURS: 30 days _____ 60 days _____ 90 days _____

C. LAST NVD FLIGHT: 6 Mths. ☐ 3 Mths. ☐ 30 Days ☐ 7 Days ☐

D. TOTAL NVD HOURS: _____

E. TOTAL NIGHT NVD HOURS: _____

F. TOTAL DAY FILTER HOURS: _____

V. ADDITIONAL REMARKS:

Name _____
Duty/Title _____
Date of mishap _____
Reporting custodian _____

Mishap severity _____
Mishap category _____
Aircraft model _____
BUNO _____

INSTRUCTIONS FOR COMPLETION OF MIR ENCLOSURE FORM 12 (continued)

Night Vision Device Data

Submission Criteria: Submit this form, Sections III and IV, for each aircrew member using NVDs when involved in the mishap.

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